٠.		(Column 1)	ARTI			09	926,7
	FOR BASIC FEE (37 CFR 1.16(a))	NUMBER FILED	(Column 2) NUMBER EXTRA	SMALL E	ENTITY	OR OTHER	RIHAR
,,	TOTAL CLAIMS (37 CFR 1.16(c)) INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 20 =) E	FEE	RATE OR	· Ff
	MULTIPLE DEPENDENT CU	minus 3 =	1.16(a))	x s 100 ₂		OR x s 50	\$
	If the difference in column CLAIMS	AS AMENDED - PAI	in column 2	+s:180		DR + 360	·
AMENIONICH	COLUMN Total (3) CFR (.16c) (Column Total (3) CFR (.16c) (3) CFR (.16c) (3) CFR (.16c) (3) CFR (.16c) (Column CLAIM REMAINI REMAINI AFTER AMENOMI Total (3) CFR (.16c) (Column CLAIM REMAINI AFTER AMENOMI (3) CFR (.16c)	MINUS (Columns) (Col	HEST MBER. OUSLY FOR (37 CFR 1.16(d)) The 21 (Column 3) ST ER ST		OR OR OR	R OTHER TH SMALL EN	ACOP FEE OF
TC	FIRST PRESENTATION OF MULE (Column 1) CLAIMS REMAINING	(Column HIGHEST	2] (Column 3)	+5 180= TOTAL ADDUFEE	OR .	× 5 200= + 360 + 507AL 400'L FEE	
AMENDMENT	Total (31 CFR 1.16(c)) Independent (31 CFR 1.16(c))	T NUMBER PREVIOUS PAID FOR Minus	PRESENT EXTRA	RATE ADDITIONAL FEE	-	RATE ADDI-	
	If the entry in column 1 is less to the thighest Number Previous the thighest Number Previous the thighest Number Previous the thighest Number Previous the thighest Number or require to process) an application of control of the thighest Number of the thighest Number or require to process) an application of the thighest Number of the thighest Number of the thigh the think th	Tan the entry in column 2, w	rile "0" in column 3	x s 1002 + s 1802 FOTAL NOO'L FEE	OR X	SOO E SOO E TAL OLFEE	
031710	to process) an application of	d by 37 CFR 1.16 The int	is the highest num	ber found in the	•		1

If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.

The Highest Number Previously Paid For Indal or Independent is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the industry) preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any competes and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS